

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 7
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	

Full Name of Payee 76 Words		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2016	
Mailing Address 1806 Vernon Street, Ste. #100		Amount 4124.26	
City Washington	State DC	Zip Code 20009	Transaction ID : B632152
Purpose of Expenditure Digital Ad Production	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2016	
Name of Federal Candidate Cortez-Masto, Catherine, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		1785807.97	

Full Name of Payee GMMB		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016	
Mailing Address 3050 K Street, NW/Suite 300		Amount 60885.00	
City Washington	State DC	Zip Code 20007	Transaction ID : B632147
Purpose of Expenditure Radio Advertising Buy	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016	
Name of Federal Candidate Heck, Joseph, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		1785807.97	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	65009.26
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Schifeling, Deirdre, , ,

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	

Full Name of Payee GMMB		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016	
Mailing Address 3050 K Street, NW/Suite 300		Amount 1071023.00	
City Washington	State DC	Zip Code 20007	Transaction ID : B632148
Purpose of Expenditure Television Ad Buy	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016	
Name of Federal Candidate Heck, Joseph, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		1785807.97	

Full Name of Payee 76 Words		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2016	
Mailing Address 1806 Vernon Street, Ste. #100		Amount 4124.27	
City Washington	State DC	Zip Code 20009	Transaction ID : B632150
Purpose of Expenditure Digital Ad Production	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2016	
Name of Federal Candidate Heck, Joseph, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		1785807.97	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1075147.27
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	

Full Name of Payee 76 Words		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016	
Mailing Address 1806 Vernon Street, Ste. #100		Amount 14968.00	
City Washington	State DC	Zip Code 20009	Transaction ID : B632151
Purpose of Expenditure Radio and Television Ad Production	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016	
Name of Federal Candidate Heck, Joseph, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		1785807.97	

Full Name of Payee Itzamna Translations Company		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 08 / 2016	
Mailing Address P.O. Box 1015		Amount 19.32	
City Glendale	State AZ	Zip Code 85311	Transaction ID : B632154
Purpose of Expenditure Translation services	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 08 / 2016	
Name of Federal Candidate Heck, Joseph, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		1785807.97	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	14987.32
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	

Full Name of Payee Priorities USA Action		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2016	
Mailing Address 601 13th Street NW Suite 610N		Amount 5000.00	
City Washington	State DC	Zip Code 20005	Transaction ID : B632153
Purpose of Expenditure Digital Ad Production		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2016
Name of Federal Candidate Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		2756286.77	

Full Name of Payee Franciska Farkas		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2016	
Mailing Address 102 Clinton Ave.		Amount 6500.00	
City Brooklyn	State NY	Zip Code 11205	Transaction ID : B632144
Purpose of Expenditure Digital Ad Production		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2016
Name of Federal Candidate Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		2756286.77	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	11500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	

Full Name of Payee Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2016	
Mailing Address 123 William St, 10th Floor		Amount 80.00	
City New York	State NY	Zip Code 10038	Transaction ID : B632145
Purpose of Expenditure Communications Staff Time	Category/ Type 001	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2016	
Name of Federal Candidate Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		2756286.77	

Full Name of Payee Blueprint Interactive		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2016	
Mailing Address 2229 North Pollard St		Amount 58475.00	
City Arlington	State VA	Zip Code 22207	Transaction ID : B632828
Purpose of Expenditure Digital Ad Buy	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2016	
Name of Federal Candidate Ayotte, Kelly, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		745724.22	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	58555.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">12</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

Full Name of Payee SKDKnickerbocker		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1150 18th St., NW #800		Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1992.00 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : B632830 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div>
Purpose of Expenditure Digital Ad Commission		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate Ayotte, Kelly, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 745724.22 </div>			

Full Name of Payee SKDKnickerbocker		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1150 18th St., NW #800		Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1992.00 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : B632831 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div>
Purpose of Expenditure Digital Ad Commission		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate Trump, Donald, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 2756286.77 </div>			

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 3984.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>

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Schifeling, Deirdre, ,
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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
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		M M / D D / Y Y Y Y Y Y 10 / 12 / 2016	

Full Name of Payee Blueprint Interactive		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 09 / 2016	
Mailing Address 2229 North Pollard St		Amount 58475.00	
City Arlington	State VA	Zip Code 22207	Transaction ID : B632829
Purpose of Expenditure Digital Ad Buy	Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 09 / 2016	
Name of Federal Candidate Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		2756286.77	

Full Name of Payee		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/ Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	58475.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1287657.85

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